

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration
Submitted with Initial
Filing

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number TNT-021030

First Named Inventor Thornell et al.

COMPLETE IF KNOWN

Application Number N/A

Filing Date 4/9/2002

Group Art Unit N/A

Examiner Name N/A

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Ashtray Apparatus

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	30081	OR	<input type="checkbox"/> Correspondence address below
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Address					
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Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) Daniel E.			Family Name or Surname Thornell		
X Inventor's Signature <i>Daniel E. Thornell</i>					Date 4-3-02
Residence: City Grand Haven		State MI	Country US	Citizenship US	
Mailing Address 15833 Cedar Ave.					
City Grand Haven		State MI	ZIP 49417	Country US	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) Orville V.			Family Name or Surname Crain		
X Inventor's Signature <i>Orville V. Crain</i>					Date 4-3-02
Residence: City Muskegon		State MI	Country US	Citizenship US	
Mailing Address 530 E. Giler Road					
City Muskegon		State MI	ZIP 49445	Country US	
<input checked="" type="checkbox"/> Additional inventors are being named on the ___ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

Please type a plus sign (+) inside this box



PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0661-0052

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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<h1>DECLARATION</h1>	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
----------------------	-----------------------------------------------------------------------------------------

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Fredrick		Thornall	
Inventor's Signature		Date <u>4-4-02</u>	
Residence: City Grand Haven	State MI	Country US	Citizenship US
Mailing Address 910 S. Albee			
Mailing Address			
City Grand Haven	State MI	ZIP 49417	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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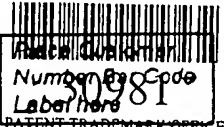


PTO/SB/01 (02-01)
Approved for use through 10/31/2002. OMB 0418-0004
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	N/A
Filing Date	April 9, 2002
First Named Inventor	Thornell, et al.
Title	Ashtray Apparatus
Group Art Unit	N/A
Examiner Name	N/A
Attorney Docket Number	TNT-021030

I hereby appoint:

- ☒ Practitioners at Customer Number 30981 → 
OR
☐ Practitioner(s) named below:

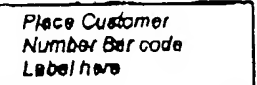
Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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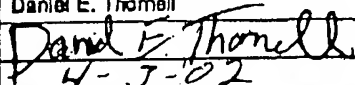
- ☐ Firm or
Individual Name

Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

- ☒ Applicant/Inventor.
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Daniel E. Thornell
Signature	
Date	4-7-02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

- ☒ Total of 3 forms are submitted.

Burdden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/88-61 (02-01)
Approved for use through 10/31/2002. OMB 0551-0032
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	N/A
	Filing Date	April 9, 2002
	First Named Inventor	Thomell, et al.
	Title	Ashtray Apparatus
	Group Art Unit	N/A
	Examiner Name	N/A
	Attorney Docket Number	TNT-021030

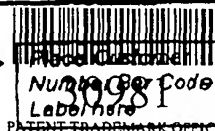
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☐ Practitioner(s) named below:

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Name	Registration Number

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Address				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/88/96).

SIGNATURE of Applicant or Assignee of Record

Name	Orville V. Crain
Signature	<i>[Handwritten Signature]</i>
Date	4-9-02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted.

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PTO/SB/81 (02-4)

Approved for use through 10/31/2002. OMB 0831-0036

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

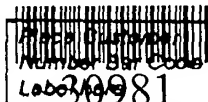
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	N/A
	Filing Date	April 9 2002
	First Named Inventor	Thornell, et al.
	Title	Ashtray Apparatus
	Group Art Unit	N/A
	Examiner Name	N/A
	Attorney Docket Number	TNT-021030

I hereby appoint:

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☐ Practitioner(s) named below:



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Address				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Frederick Thornell
Signature	
Date	4-4-02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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